Application Data Sheet

Application Information

Application Number::

Filing Date::

Application Type::

Subject Matter::

Title::

Attorney Docket Number::

Request for Early Publication?::

Request for Non-Publication?:: Suggested Drawing Figure::

Total Drawing Sheets::

Small Entity::

Petition included?::

Regular

Utility :

Scanning Electron Microscope

1714765

No

No

1

No

No

Inventor

Hirotami

Full Capacity

Japan

KOIKE

Tokyo

Tokyo

Japan

Applicant Information

Applicant Authority type::

Primary Citizenship Country::

Status::

Given Name::

Middle Name::

Family Name::

Name Suffix::

City of Residence::

State or Province of Residence::

Country of Residence::

Street of mailing address::

Japan

c/o Kabushiki Kaisha TOPCON,

75-1, Hasunuma-cho,

Itabashi-ku

City of mailing address::

State or Province of mailing address::

Country of mailing address::

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Initial 07/08/03

1526034.01.03

Postal or Zip Code of mailing address:: 174-0052

Applicant Information

Applicant Authority type:: Inventor

Primary Citizenship Country:: Japan
Status:: Full Capacity

Given Name:: Kouji

Middle Name::

Family Name:: KIMURA

Name Suffix::

City of Residence:: Tokyo

State or Province of Residence::

Country of Residence:: Japan

Street of mailing address:: c/o Kabushiki Kaisha TOPCON,

75-1, Hasunuma-cho,

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City of mailing address:: Tokyo

State or Province of mailing address::

Country of mailing address:: Japan

Postal or Zip Code of mailing address:: 174-0052

Correspondence Information

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Representative Information

Representative Customer Number::

24240

Domestic Priority Information

Application::

Continuity Type::

Parent Application::

Parent Filing Date::

Foreign Priority Information

Country::

Japan

Application Number::

2002-208990

Filing Date::

07/18/02

Priority Claimed::

Yes

Assignee Information

Assignee Name::

Kabushiki Kaisha TOPCON

Street of mailing address::

75-1, Hasunuma-cho,

Itabashi-ku

City of mailing address::

Tokyo

State or Province of mailing address::

Country of mailing address::

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Postal or Zip Code of mailing address::

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